## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000010649

Entity Name: DURANGO DENTAL SUPPLY, INC.

FILED Feb 14, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6726 FAIRVIEW TERR BRADENTON, FL 342038855

**Current Mailing Address: New Mailing Address:** 

6726 FAIRVIEW TERR BRADENTON, FL 342038855

FEI Number: 88-0414441 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

PILLION, KEVIN PILLION, KEVIN 6726 FAÍRVIEW TERRACE 6726 FAİRVIEW TERR BRADENTON, FL 342038855 US BRADENTON, FL 34203 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KEVIN PILLION 02/14/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition PDS ( ) Delete Title: PDS

PILLION, KEVIN Name: Name: PILLION, KEVIN 6726 FAIRVIEW TERR 6726 FAIRVIEW TERRACE Address: Address:

City-St-Zip: BRADENTON, FL 342038855 City-St-Zip: BRADENTON, FL 34203

Title: () Delete Title: VΡ ( ) Change (X) Addition

WIZE, RAYMOND Name: Name: 6726 FAIRVIEW TERRACE Address: Address:

BRADENTON, FL 34203 City-St-Zip: City-St-Zip:

Title: Title: ( ) Change (X) Addition () Delete

Name: WIZE, BARBARA Name: Address: Address:

6726 FAIRVIEW TERRACE City-St-Zip: City-St-Zip: BRADENTON, FL 34203

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN PILLION PDS 02/14/2005